

## SAF V Survey Report

### Army Support Programs and Civilian Spouse Deployment Adjustments

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#### Background

Deployment has become a significant fact of life for the majority of Army families. The Global War on Terror (GWOT) has required separations for both training and overseas missions and many of these families have experienced multiple deployments of their Soldiers since 2001. These deployment experiences have potential impacts on the adjustments of soldiers and members of their families. To assist in these adjustments, the Army provides a variety of support programs and services that are designed to promote positive adjustments and strengthen family well-being during the period of separation. These services range from medical and mental health support provided by health services and chaplains to practical and social support from Army Community Services, Child Development Services and Recreation Services. These programs support the objective of the Army Well-Being Strategic Plan that individuals in the Army attain a positive sense of well-being. The Army recognizes that periods of separation are potentially stressful for families and that this stress can impact the readiness of the soldier and his/her unit. Thus, it is in the best interests of the Army to promote positive deployment and separation adjustments among spouses and children.

#### Key Actions

- ❖ Improve customer service among Army support agency civilian personnel.
- ❖ Market Army support program services through units prior to and during deployments.
- ❖ Expand family support services to families living off post.
- ❖ Increase the sensitivity of program staffs to the needs of junior enlisted families.
- ❖ Actively reach out to families and units experiencing multiple deployments.
- ❖ Train support program staffs to identify personal and family risk factors and provide or refer to appropriate services.

#### Key Findings

- ❖ Army spouses increase their use of Army support services during deployments.
- ❖ Health care is the most widely used service during deployment (79%) followed by recreation (42%), CDS (29%), ACS (23%) and Chaplains and FAC (17%).
- ❖ Support program use is highest among those with more months of deployment, living on post and not employed.
- ❖ Army support programs are used by those who are having significant difficulties as well as those who are managing well.
- ❖ Most (60%) spouses feel comfortable accessing Army services but fewer (47%) feel they are respected by the staffs.

The objective of this report is to provide an analysis of the role that Army support programs and agencies play in the adjustments of Army civilian spouses during military deployments. Program use and satisfaction with support services during the deployment is examined within the context of the challenges that Army families may be experiencing. Since support programs may reach out to those who are doing well, as well as those who are struggling, a risk profile is provided to assess the use of services among those who are at high and low levels of risk for personal and relational challenges.

#### Data Source

The U.S. Army Community and Family Support Center (CFSC), in conjunction with the U.S. Army Research Institute for the Behavioral and Social Sciences (ARI), has conducted Surveys of Army Families (SAFs) every 4 years or so to examine areas important to Army families. The most

recent survey (SAF V) was conducted between September 2004 and January 2005. A previous survey (SAF IV) was conducted in April through July 2001. This survey is one way to assess the effectiveness of the Army's Well-being Initiative.

Key questions related to deployment and separation experience and adjustment are included in each survey to permit the identification of factors associated with personal and family adjustments. The 2004-2005 SAF was specifically designed to address these questions with 3 forms of the survey distributed. Form 1 was sent to spouses whose member was currently deployed to a theater of operation. Form 2 was sent to spouses whose member had been deployed to a theater of operation but had returned in the past 12 months. Form 3 was sent to other Army spouses. Data from these 3 survey forms were difficult to compare to earlier surveys due to the unique nature of current deployment patterns. In this report, only data from the spouses with current or recent deployments are included. Since the survey is conducted from a sample of Army spouses, any interpretation of the findings should take into account the sampling error (SEs). For this report the following SEs apply: overall sample = +/- 1%; officer spouses = +/- 2%; enlisted spouses = +/- 2%. For sub-group analyses, when the sample sizes are smaller, an SE of +/- 3-4% is used to detect significant differences.

## Key Findings

The findings in this analysis are provided in three sections: (1) Deployment and Army Program Experience; (2) Deployment Related Challenges; (3) Army Support Experiences and Spouse Challenges and (4) Helpfulness of Army Support Services.

### *Deployment and Army Program Experience*

Each of the Army civilian spouses who were currently experiencing a deployment or who had experienced a deployment in the past 12 months were asked if they had used selected Army support services during that deployment. The list of potential services that might have been used was limited to six programs, each of which has services that can be helpful to the families of deployed Soldiers (see Table 1). For three of these programs (health care, recreation and Child Development Services), spouses were asked if they used the program and if their use of the program increased or decreased during the deployment. Later in the survey they were asked the level of satisfaction with these programs. For the remaining three programs (Army Community Service, Family Assistance Center and Chaplain or Chapel support), spouses were asked if they used the program and if so, how helpful it was to them during the deployment.

The most commonly used Army program used during the deployment was health care, with 79% of spouses indicating use. Over half of the spouses (57%) indicated that they are satisfied with the quality of health care that they or their family members have received. One in four spouses (24%) indicated that they increased their use of health care services during the deployment. Other key findings related to the use and satisfaction with Army support programs during deployment include:

Table 1: Experience with Selected Army Services During Deployment				
	% Used	% Increased	% Helpful	% Satisfied
Health care providers	79	24		57
Army recreation	42	34		62
Child Development Services*	29	41		52
ACS	23		68	
Family Assistance Center	17		43	
Chaplain/Chapel	17		59	

\*Among families with children.

- ★ Army recreation services offer a range of quality of life programs and are the next most commonly used non-medical service during deployment, with 42% of spouses using this installation program. One in three spouses (34%) indicated they increased their use during the deployment and 62% said they are satisfied with the services they received.
- ★ Child Development Services (CDS) provide valuable assistance to parents of young children and 29% of spouses used this service. Over four in ten (41%) of the spouses who used CDS increased their use during the deployment. Over half (52%) of the spouses were satisfied with the services they and their children received.
- ★ Army Community Service (ACS) also has a range of personal and financial assistance programs and these were accessed by 23% of spouses during the deployment. Over two-thirds (68%) of spouses found these services helpful, the highest rating of satisfaction for deployment related services in the survey.
- ★ Chaplain services were used by 17% of spouses during the deployment with the majority of spouses (59%) accessing these services indicating they found the assistance helpful.
- ★ Family Assistance Centers (FACs) were co-located service centers established at many installations to provide one-stop-assistance for deploying and deployed families. These were used by 17% of spouses and 43% of spouses reported that the services they received were helpful.

The use of these Army support services during deployment can vary depending on the circumstances of the spouses and families. The data on Table 2 describe the variations in use of ACS, CDS and FACs according to the pay grade of the Soldier, the number of months of deployment in the past 36 months, the employment status of the spouse and the distance from the installation where the spouse lives. For ACS and FACs, use of the program does not vary a great deal among spouses from different pay grade groupings. CDS is most often used by the spouses of junior grade officer and enlisted families but this is largely a function of the younger ages of their children. Other findings include:

- ★ The use of these Army support services increases significantly after spouses have experienced deployments of more than 12 months. ACS use increased from 19% to 25%; CDS use from 25% to 33%; and FAC use from 16% to 18% (and 21% after 19 or more months of separation).
- ★ Spouses who are not employed (25%) or who work part-time (23%) are more likely to use ACS than those who work full-time (20%). This may be because of less need for services or less available time to access services when they are available. Employment status is not related to the use of CDS or FAC services.
- ★ Living at a distance from the installation definitely reduces use of all these

	<b>ACS</b>	<b>Family Asst Center</b>	<b>Child Devel Serv*</b>
Officer	24	16	34
O1-O3	25	15	39
O4-O6	23	16	29
Enlisted	23	17	28
E1-E4	23	17	25
E5-E6	24	18	30
E7-E9	20	16	26
Dep. 0-6 Mo.	19	16	25
Dep. 7-12 Mo.	23	16	28
Dep. 13-18 Mo.	25	18	33
Dep. 19+ Mo.	26	21	28
Employed Full Time	20	17	30
Employed Part Time	23	18	29
Not Employed	25	17	28
Live On Post	29	20	36
10 Miles or Less from Post	20	15	27
More than 10 Miles from Post	19	16	22
<b>Overall</b>	<b>23</b>	<b>17</b>	<b>29</b>

\*Among families with children

Army support services. The programs are all more likely to be used by those living on post. For ACS, 29% of those living on post during the deployment used ACS compared to 19% of those living more than 10 miles away. Similarly, FAC use drops from 20% for those on post to 16% of those living farther away. CDS use drops the greatest from 36% to 22%.

Table 3 provides similar findings for the other three Army support programs included in this analysis. These programs have very different purposes so their patterns of use vary considerably. Health care is the most commonly used Army service and there is little substantial difference in use during deployment according to the paygrade level of the spouse. This is in contrast to Army recreation and chaplain programs which are much more likely to be used by officer spouses. For Army recreation programs, 52% of officer spouses used these during the deployment compared to 40% of enlisted spouses. For chaplain contacts, 20% of officer spouses accessed chaplains compared to 16% of enlisted spouses. Other findings related to use of these programs include:

- ★ All of these services are used less among the spouses with the fewest months of deployment exposure, indicating needs for support increase as deployment separations increase. Contacts with chaplains increase from 13% of spouses with 6 or fewer months of separation to 21% of spouses with over 18 months of separation experience. Recreation program use increases from 36% to 43% over this same period of separation exposure.
- ★ Employment status only marginally influences use of these Army support programs with the families of those employed full time slightly less likely to use these programs.
- ★ Distance from post does not affect the use of health care services but Army recreation and chaplain use declines markedly among those living off-post, especially among those living 10 or more miles from post. Use of Army recreation drops from 53% of those on post to 33% of those living 10 or more miles away. Chaplain use drops from 21% to 15%.

	<b>Health Care Providers</b>	<b>Army Recreation</b>	<b>Chaplain/Chapel</b>
Officer	80	52	20
O1-O3	80	50	18
O4-O6	81	55	22
Enlisted	79	40	16
E1-E4	77	32	16
E5-E6	79	42	16
E7-E9	80	49	16
Dep. 0-6 Mo.	76	36	13
Dep. 7-12 Mo.	80	42	16
Dep. 13-18 Mo.	80	47	19
Dep. 19+ Mo.	81	43	21
Employed Full Time	77	41	16
Employed Part Time	80	44	17
Not Employed	82	44	17
Live On Post	80	53	21
10 Miles or Less from Post	78	41	14
More than 10 Miles from Post	80	33	15
<b>Overall</b>	<b>79</b>	<b>42</b>	<b>17</b>

### ***Deployment-Related Challenges***

Before examining the potential contribution of these six Army support programs to Army family well-being, it is helpful to understand the challenges that Army families face during and after deployments. The SAF V survey asked specific questions related to issues families may have faced during or after the deployment and how well the spouse and family were able to cope or adapt to these challenges (see Table 4). The support programs under review are not specifically designed to just help those families who are at "high risk" for emotional, health or relationship difficulty because of deployment related experiences but they are also designed to promote

positive skills development for those at “low risk” in order to sustain and encourage family resilience and strength. For example, ACS provides counseling for families that are having difficulty with their finances as well as helpful classes and consultation on how to manage the family budget on one’s income or during a deployment.

The data on Table 4 summarize the answers of the spouses to questions related to marital, parenting, financial, health and personal well-being challenges that they may have faced during or immediately after the deployment of their Soldier spouse. For each of these challenges, the spouses indicated how well they coped or functioned at this time. Their responses were dichotomized into either “low risk” or “high risk” on each dimension. Low risk was defined as having coped well or reporting high adjustment on that indicator. Since low risk for problems is a desired state and indicates higher levels of resilience or strength on that dimension, we categorized the remaining spouses as demonstrating higher risk. The results of this analysis offer some understanding of the pressures Army families face during deployments and how these pressures vary across the challenges identified.

The following are key findings related to deployment related challenges and risks for Army families:

- ★ One in three spouses (38%) demonstrate higher risks in their marriages, as indicated by lower satisfaction and intimacy ratings. Over half (52%) are having difficulty with marital communication.
- ★ Parenting challenges are common among deployed spouses with the greatest difficulties reported for deployment coping among their children (51%) and the parents’ ability to meet their children’s expectations (56%). Other challenges were found between one-quarter and one-third of the parents.
- ★ One-third (32%) of the spouses could not indicate they were doing well in meeting the basic financial needs of their family during the deployment. Half (48%) indicated some challenges in handling financial readjustments after the Soldier spouse returned.
- ★ One in four spouses (43%) indicated were not doing well in taking care of their own health needs during the deployment. This was also reported by 17% of the parents related to their children’s health.
- ★ The area of challenge with the highest risk indicators is personal well-being. Two thirds of spouses demonstrated elevated risks for loneliness (66%) and personal satisfaction (70%). Family readjustment risks after the deployment were also reported by about half of the spouses.

Table 4: Deployment Challenges and Spouse Risk Levels (High and Low Risk)		
	Overall Risk %	
Challenges	High Risk	Low Risk
Marital Challenges		
Marital satisfaction	38	62
Marital intimacy*	38	62
Marital communication*	52	48
Parenting Challenges^		
Caring at home	23	77
Child discipline	35	65
After school activities	38	62
Schoolwork done	28	72
Meeting expectations	56	44
Child coping	51	49
Financial Challenges		
Handling finances	24	76
Meeting basic needs	32	68
Serious financial problems	18	82
Financial readjustments*	48	52
Health Challenges		
Personal health	43	57
Child's health^	13	87
Personal Well-being Challenges		
Daily household tasks	34	66
Handling loneliness	66	34
Reestablishing roles*	57	43
Making household decisions*	53	47
Personal satisfaction	70	30
*Among deployed & returned only		
^Among families with children only		

## ***Army Program Experience and Spouse Challenges***

### ***Army Community Service***

Army Community Service is a comprehensive family support agency that provides a range of support programs for Army personnel and families. These include assistance with financial issues, support for spouse employment, deployment and relocation assistance and other services. The SAF V survey did not ask spouses which of the programs or services that ACS provided them, only whether they used ACS during the deployment of their Soldier spouse. As indicated on Table 1, 23% of spouses' accessed ACS services during deployment and 68% found these services helpful in their deployment adjustment. The data on Table 5 indicate the level of use and satisfaction with use among spouses who report high and low levels of risk on the challenges that ACS programs may help families address. These data help us understand who is using ACS services and whether the programs within ACS may provide help or supportive services to families at higher and lower levels of risk. The findings indicate:

- ★ ACS programs serve families at both high and low risk of marital challenge, although couples experiencing difficulties with communication and intimacy are slightly more likely to go to ACS for help than those who are not having difficulty with these relationship issues.
- ★ Similarly, ACS programs serve families who are experiencing high and low risks for parenting and personal well-being challenges, with those experiencing higher risks in these areas somewhat more likely to go to their ACS than those with lower risks.
- ★ It is in the financial area of challenge that those with higher risk are much more likely to go to their ACS. While many families with low financial risks (22%) also go to ACS for supportive services, 31% of the spouses reporting serious financial problems used ACS during the deployment.
- ★ Overall, ACS appears to provide a balance of prevention and crisis support services and serve families both at higher levels of risk who need help and those at lower levels of risk who desire support and skills.
- ★ Satisfaction with ACS services is significantly higher among those spouses who are at lower risk for problems. Those at higher risk levels are experiencing more challenges and

<b>Table 5: ACS Program Experience and Army Family Challenges</b>				
	<b>Overall ACS Use - %</b>		<b>Satisfaction with ACS - %</b>	
<b>Challenges</b>	<b>High risk</b>	<b>Low risk</b>	<b>High risk</b>	<b>Low risk</b>
<b>Marital Challenges</b>				
Marital satisfaction	24	23	63	71
Marital intimacy*	26	23	59	70
Marital communication*	25	22	63	69
<b>Parenting Challenges<sup>^</sup></b>				
Child care at home	28	24	59	73
Child discipline	27	24	65	72
Meeting expectations	27	23	65	73
Child coping	25	23	63	76
<b>Financial Challenges</b>				
Handling finances	27	23	59	71
Meeting basic needs	27	22	56	75
Serious financial problems	31	22	53	72
Financial readjustments*	25	22	61	70
<b>Personal Well-being Challenges</b>				
Daily household tasks	25	23	62	71
Handling loneliness	25	22	63	78
Reestablishing roles*	26	21	63	71
Making household decisions*	26	21	63	69
Personal satisfaction	23	24	65	74
<small>*Among deployed &amp; returned only</small>				
<small><sup>^</sup>Among families with children only</small>				



meeting their needs probably requires more time and patience on the part of the customer, and the program provider.

### ***Child Development Services***

The Army provides high quality child development services for its families. This includes center-based care and home-based care programs. These services can be used for full-time care for working parents or for respite care when parents may need a break. The SAF V survey did not ask the spouses the type or length of care that parents may have used from their CDS installation program. The data on Table 1 indicate that 29% of spouses used CDS care and that 52% are satisfied with the care they have received from CDS. Given that child care services can help parents manage their parenting and other obligations during deployment, the use of child care may be used by some parents for necessary stress management and for others as a benefit that helps them sustain employment or build resilience into their lives (see Table 6). The data indicate:

- ★ Parents who are demonstrating higher risks for parenting challenges are somewhat more likely to use CDS services than those without those risks. For example, 34% of parents who are having difficulty caring for their children at home used CDS during deployment compared to 30% of parents who did not report this difficulty.

<b>Table 6: CDS Program Experience and Army Family Challenges</b>				
	<b>CDS Use - %</b>		<b>CDS Satisfaction - %</b>	
<b>Challenges</b>	<b>High risk</b>	<b>Low risk</b>	<b>High risk</b>	<b>Low risk</b>
Parenting Challenges <sup>^</sup>				
Caring at home	34	30	41	56
Child discipline	33	29	44	58
After school activities	36	32	41	63
Schoolwork done	34	30	43	57
Meeting expectations	29	27	50	60
Child coping	30	29	45	60

<sup>^</sup>Among families with children only

- ★ Higher risk parents are experiencing significant parental challenges and this may make it more difficult for them to be satisfied with CDS services. This may explain why only 41% of the parents experiencing difficulty with their children at home and who use CDS are satisfied with CDS services compared to 56% of those who are not having this difficulty.

### ***Chaplain Services***

Chaplains offer complementary services to other formal family support programs offered by the Army. Chaplains are often trained in personal and family counseling, offer marriage and parenting classes, provide some financial help and give access to a caring community support system. Even though 60% of spouses indicated on the survey that had attended religious services during the time of the deployment, 17% indicated that they specifically sought out an Army chaplain or received chapel support during this time. The majority (59%) of these spouses who contacted a chaplain were pleased with the help they received.

Given the wide range of assistance that spouses might seek from a chaplain, data are reviewed on Table 7 for a variety of potential challenges that spouses and families may have experienced during the deployment. The findings indicate:

- ★ Spouses with marital challenges are more likely to see a chaplain than those who are doing well in their marriages. This may be because of the counseling skills and confidentiality that chaplains can offer them.
- ★ Spouses with parenting challenges also are more likely to get chaplain help than those without these challenges.

- ★ Chaplains also appear to attract families who are going through personal readjustments after a deployment, especially in the areas of reestablishing family roles and making household decisions. Since these are both personal and relationship issues, chaplains may be viewed as a resource for these issues as part of their marriage support services.
- ★ Similar to ACS, chaplains also attract spouses who are having difficulty with managing their family finances during the deployment. For example, among those who are having serious financial problems, 24% went to see a chaplain compared to 16% who are not having these problems.
- ★ Overall, chaplains provide support services to Army families who are having difficulties as well as those who are not. The balance of support sought, however, appears to be higher among those who are demonstrating higher challenges and risks.
- ★ The satisfaction ratings for chaplain services are higher among those spouses who are getting support and have lower risks for personal and relationship challenges.

Table 7: Chaplain Program Experience and Army Family Challenges				
	Chaplain Use - %		Chaplain Helpful - %	
Challenges	High risk	Low risk	High risk	Low risk
Marital Challenges				
Marital satisfaction	18	17	52	63
Marital intimacy*	20	16	51	62
Marital communication*	20	15	54	63
Parenting Challenges <sup>^</sup>				
Caring at home	22	17	50	64
Child discipline	21	17	53	64
After school activities	23	19	52	69
Schoolwork done	22	19	55	65
Meeting expectations	20	16	56	63
Child coping	19	17	53	69
Financial Challenges				
Handling finances	21	16	49	63
Meeting basic needs	21	16	49	65
Serious financial problems	24	16	45	64
Financial readjustments*	19	16	52	63
Personal Well-being Challenges				
Daily household tasks	20	16	53	62
Handling loneliness	18	16	53	71
Reestablishing roles*	20	15	54	63
Making household decisions*	20	15	54	63
Personal satisfaction	17	17	56	65
*Among deployed & returned only				
<sup>^</sup> Among families with children only				

### ***Recreation Services***

Army recreation programs are very diverse and provide fun and enriching experiences for every age and family life experience. Recreation programs include arts and crafts, bowling, fitness programs, golf and lots more. These programs are designed to help people manage stress in their lives and build skills and relationships that foster resilience and strength. Army recreation services were used by 42% of the spouses who experienced a deployment and 62% of spouses' report that they are satisfied with the programs in which they participated.

The data on Table 8 present information on the use of Army recreation programs among those who are high or low risk for financial, personal and relational challenges. Some of the key findings include:

- ★ Recreation programs are more likely to be used by deployed spouses and families with fewer challenges (lower risks) than those who have more challenges (higher risks) in their lives.



- ★ Even though these programs attract a higher proportion of lower risk families, they do serve many higher risk families which may help promote greater resilience in the families who are experiencing the stresses of deployment.
- ★ Financial stress appears to serve as a barrier to recreation program participation among these deployed families. Among those families reporting difficulty in meeting basic needs, 38% used recreation programs compared to 46% of those who do not have this problem.

Table 8: Recreation Program Experience and Army Family Challenges				
	Recreation Use - %		Recreation Satis. - %	
Challenges	High risk	Low risk	High risk	Low risk
Marital Challenges				
Marital satisfaction	41	44	56	65
Marital intimacy*	41	42	55	66
Marital communication*	41	43	55	69
Parenting Challenges^				
Caring at home	44	49	49	64
After school activities	52	58	48	67
Schoolwork done	51	54	49	64
Child coping	43	50	52	68
Financial Challenges				
Meeting basic needs	38	46	48	67
Serious financial problems	40	45	48	65
Personal Well-being Challenges				
Handling loneliness	42	48	57	71
Personal satisfaction	42	45	57	72
*Among deployed & returned only				
^Among families with children only				

### Health Services

The Army provides comprehensive health services to its Soldiers and their family members. This is a significant benefit to Army families and these services are widely used. During their recent deployment, 79% of Army families indicated they used Army health services and 24% of families indicated that they increased their use of these services during the deployment. Over half of these families (57%) are quite satisfied with the quality of health care they receive from Army health services. We might expect that families who are experiencing more personal, family and health challenges would seek health services more frequently but the data on Table 9 indicate only marginal differences in health care use among those who are at higher and lower risks for these challenges. Key findings from this analysis include:

- ★ Spouses who report personal health care challenges are only slightly more likely to access Army health care (84%) than those who report few health challenges (81%).

Table 9: Health Services Experience and Army Family Challenges				
	Health Services Used - %		Satisfied with Health Services - %	
Challenges	High risk	Low risk	High risk	Low risk
Health Challenges				
Personal health	84	81	48	64
Child's health^	88	86	47	60
Marital Challenges				
Marital satisfaction	82	79	52	60
Marital intimacy*	82	81	48	58
Marital communication*	83	80	49	60
Parenting Challenges^				
Caring at home	88	86	50	60
Meeting expectations	86	84	51	61
Child coping	85	84	51	65
Personal Well-being Challenges				
Daily household tasks	85	81	53	60
Handling loneliness	84	81	53	65
Personal satisfaction	82	77	54	66
*Among deployed & returned only				
^Among families with children only				

- ★ There is no significant increase in the use of Army health care among those spouses who indicate higher risks for challenges in their marriages or parenting.
- ★ Spouses with greater personal well-being challenges are more likely to seek health care support than those with few such challenges but both groups are high users of Army health care.
- ★ The data indicate that health services are widely needed and used by all Army families and not overly accessed by those with significant personal and family problems during deployments and afterward.

### ***Helpfulness of Army Support Services***

The data in this report indicate significant variation in the use of and satisfaction with selected Army support services accessed during deployment. Despite this variation the services are similarly used by families who are experiencing significant personal and family challenges and those who are not. One of the reasons for this widespread use is the degree of comfort that Army spouses report with Army agencies on their installations. When asked if they “feel comfortable dealing with Army agencies”, 60% of spouses agreed that they are comfortable (see Table 10). When asked if they are comfortable dealing with the Army medical system while their spouse is away, an even higher percentage (76%) agreed with this. This agreement, however, is not without some criticism. Less than half of the spouses (47%) who had experienced a current or recent deployment reported that “Army civilian employees who deal primarily with Army families treat them with the appropriate amount of respect.” Even fewer (43%) agreed that “Army civilian employees who deal primarily with Soldiers treat family members with the appropriate amount of respect.” These findings indicate that Army support agencies may need to provide training to their staffs in how best to treat, serve and support Army families in their communities. Other findings in this analysis include:

	<b>Comfort with Army agencies</b>	<b>Comfort with Army medical system</b>	<b>Family services personnel show families' respect</b>	<b>Soldier services personnel show families' respect</b>
Officer	74	80	49	43
O1-O3	70	78	47	41
O4-O6	81	84	54	48
Enlisted	57	75	47	44
E1-E4	46	69	46	42
E5-E6	60	77	46	43
E7-E9	72	82	51	48
Dep. 0-6 Mo.	59	75	49	46
Dep. 7-12 Mo.	59	76	47	43
Dep. 13-18 Mo.	63	77	47	43
Dep. 19+ Mo.	61	78	44	41
Employed Full Time	63	76	49	46
Employed Part Time	60	76	48	44
Not Employed	58	76	46	42
Live On Post	63	80	48	44
10 Miles or Less from Post	60	77	49	45
More than 10 Miles from Post	57	72	45	42
<b>Overall</b>	<b>60</b>	<b>76</b>	<b>47</b>	<b>43</b>

- ★ Spouses of officers are much more comfortable dealing with Army agencies (74%) and the Army medical system (80%) than spouses of enlisted (57% and 75%). Only a minority of junior enlisted spouses are comfortable (46%) dealing with Army support agencies, other than health care.
- ★ The number of months of deployment experience does not influence the level of comfort with Army agencies or health services.
- ★ Spouses who are not employed are somewhat less likely to be comfortable dealing with Army support agencies but this has no impact on comfort with the medical system.
- ★ Spouses who live more than 10 miles from post indicate they are less comfortable with both Army support agencies and the Army medical system.
- ★ Fewer than half of the spouses experiencing a recent deployment believe that families are shown respect by personnel in family support agencies. This is true for nearly all categories of families on Table 10, irrespective of rank, number of months of deployment, employment status, or distance of their residence from the post. Only the spouses of field grade officers are slightly more likely to believe that they are respected by these civilian personnel (54%).
- ★ The findings regarding the perceptions of respect shown to families in services typically provided to Soldiers is similar to that of family support services. Even fewer spouses report that they receive respect from these services compared to services specifically targeting families and that is true for all spouse groups, irrespective of rank, number of months of deployment, employment status, or distance of their residence from the post.

## Conclusions

The findings in this report indicate widespread use of Army support agencies by spouses who have recently experienced the deployment of the Soldier member of their family. The majority of these spouses considers these agencies an important resource to them and reports that the services they received were helpful and satisfactory. Medical and recreation services are the most widely used by Army families. CDS, ACS and Chaplain services are also widely used and provide very specific programs that address the needs of many Army families.

One of the important findings from this analysis is that all of these programs are used by the families of deployed Soldiers who have different needs and experiences. Families who are experiencing higher levels of personal and family challenge use these programs to get help with their needs. Families who are functioning quite well on these indicators of challenge also use Army support services to sustain their strengths and build further resilience. Families with fewer challenges are slightly more likely to use Army recreation services than those with more challenges. The reverse is true for ACS, Chaplain and CDS with slightly more of their participants coming from families with higher levels of personal or family challenges. Army health services are used by families of all levels of challenge. This indicates that every service reviewed in this report is used and valued by families for both prevention and early intervention support as well as for crisis and direct assistance support.

There are several barriers that Army support agencies need to address if they are to improve on their utilization and satisfaction rates. One key issue is staff customer services training since the majority of spouses do not believe the civilian staffs of family support services are respectful of their circumstances and needs. This is even truer of those services that primarily serve Soldiers. This barrier, which is even higher among junior enlisted personnel, can be a significant impediment to families seeking help or coming to classes or events that might strengthen their resilience during deployments.

Another key barrier is the distance of these services from where many Army families reside. With the exception of medical services, families who live off post, especially those living at least 10 miles away, are less likely to take advantage of Army quality of life support services. This suggests that services may need to be offered at hours that are more convenient for off-post families to come or that services may be out placed in neighborhoods or communities with high concentrations of Army families. More effort should be undertaken to understand the special needs of these off-post families and how best to serve them.